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EE TRANSMITTAL for FY 2004

Effective 10/01/2003. Patent fees are subject to annual revision. Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT

(S)	42
(4)	7 40

Complete if Known							
Application Number	09/826,040						
Filing Date	04/05/01						
First Named Inventor	Phillippe Pantigny						
Examiner Name	Nguyen, Tu T						
Art Unit	2877						
Attorney Docket No.	034299-327						

METHOD OF PAYMENT (check all that apply)							FEE CALCULATION (continued)								
							3. AD	3. ADDITIONAL FEES							
☑ Check ☐ Credit card ☐ Money ☐ Other ☐ None															
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☐ Deposit Account.							Fee	Fee	Fee	Fee	Fee Description	Fee Paid			
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Number							1052	30	2032	23	or cover sheet.				
Deposit THELEN REID & PRIEST, LLP						1053	130	1053	130	Non-English specification					
	Account P.O. BOX 640640				1812	2,520	1812	2,520	For filing a request for reexamination						
Name SAN JOSE, CA 95164-0640									1804	920*	1804	920*	Requesting publication of AIR prior to		
The Director is authorized to: (check all that apply) ☐ Charge fee(s) indicated below ☑ Credit any overpayments													Examiner action 0 100	ļ	
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			FEE	CAL	CULATION					1252	420	2232	210	Extension for reply within second month	420
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1001	770	2001	385	Uti	ility filing fee				╛	1401	330	2401	165	Notice of Appeal	
1002	340	2002	170	De	esign filing fe	e	L		╛	1402	330	2402	165	Filing a brief in support of an appeal	
1003	530	2003	265		ant filing fee				_	1403	290	2403	145	Request for oral hearing	
1004	770	2004	385		issue filing t		\vdash		4	1451	1,510	1451	1,510	Petition to institute a public use proceeding	
1005	1005 160 2005 80 Provisional filling fee							╛	1452	110	2452	55	Petition to revive – unavoidable		
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Code	(\$)	Co		\$)	Fee Desc	<u>ription</u>				''		-000	000	(37 CFR § 1.129(a))	
1202	18	220	02 9)	Claims in	excess of	20			1810	770	2810	385	For each additional invention to be	
1201	86	220	01 4	3	Independe	ent claims	in ex	cess of 3						examined (37 CFR § 1.129(b))	
1203	290	220	03 1	45	Multiple d	Multiple dependent claim, if not paid					770	2801	385	Request for Continued Examination (RCE)	
1204	86	220	04 4	3	** Reissue original pa	sue independent claims over patent				1802	900	1802	900	Request for expedited examination of a design application	
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Registration No. (Attorney/Agent) Name (Print/Type) Khaled Shami 38,745 Telephone 408-292-5800 August 2 , 2004 Date Signature

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